

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>2/2/99</i>
O.I.P.E. CLASSIFIER		<i>48</i>	<i>2/3/99</i>
FORMALITY REVIEW	<i>Q</i>	<i>71531</i>	<i>2/3/99</i>

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral) ..... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	1/25/02
2	6/12/02
3	12/13/02
4	5/29/03
5	12/11/03
6	5/24/04
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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